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BROWN ON SURGICAL DISEASES OF WOMEN, SIXTEEN PAGES.

CLINICALS.

Statistics of the Principal Operations performed in the London Hospitals during the month of August, 1855.

Lithotomy.—Number of cases, 4; recovered, 3; died 1.

Case 1. A child, aged 2½, in fair health, under the care of Mr. Cock, in Guy's Hospital. The usual operation was performed, and very little bleeding attended it. The stone removed was about the shape of a date stone, but smaller. About an hour after the operation severe bleeding occurred, and when Mr. Cock was summoned the child was all but dead. A trial was made of the oiled silk apparatus made for that purpose, but it failed to control the bleeding, and was removed. The wound was next filled with sponge, and the hemorrhage was now arrested. The child subsequently recovered well. *Case 2.* A boy, aged 9, in good health, under Mr. Hilton's care, in Guy's Hospital. Some bleeding followed the operation, and the oiled silk apparatus, with ice, was employed successfully. An

ovoid lithic acid calculus, nearly as large as a walnut, was removed. Recovered. *Case 3.* A delicate boy, aged 4, under the care of Mr. Borlase Childs, in the Metropolitan Free Hospital. He was taken first to Mr. Childs' house, suffering from retention of urine and other symptoms of impacted calculus. On passing a sound a rough substance was felt in the prostatic urethra, over which the end of the instrument passed. In the belief that it would not be necessary to enter the bladder, the operation was at once performed. The stone, however, had meanwhile slipped back, and an ordinary lithotomy procedure was consequently necessary. A small stone was removed, and the child afterwards sent to the hospital. Recovered without a bad symptom. *Case 4.* A man, aged 68, under the care of Mr. Ferguson, in King's College Hospital. He was in bad health and paralytic. The symptoms of stone had been present for a year, and dated from an attack of paralysis of the bladder, which had now been quite recovered from. The usual operation was performed, when the stone was found to be

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encysted behind the prostate. A small portion broke off in the forceps, but for the dislodgement of the remainder the scoop was necessary. The stone was the size of a small cherry, being a mulberry nucleus, coated with phosphates. The man did badly afterwards, and death took place on the fifth day. At the autopsy the cellular tissue of the pelvis was found infiltrated with pus. The kidneys were contracted, and occupied by many cysts; the ureters were inflamed, and contained pus. The bladder was extensively sacculated, and its mucous membrane so much congested as to appear on the point of sloughing. There was no peritonitis. The heart was large and fatty, and its aortic valves diseased to a small extent. The brain was congested, and its bloodvessels extensively ossified.

Lithotripsy.—The man recently under the care of Mr. Curling, in the London Hospital, has been discharged well. Three operations had been performed, from none of which had the slightest inconvenience resulted. The fragments of a smallish calculus were passed by the urethra, and subsequently all symptoms ceased, while by careful sounding no stone could be detected.

Cystotomy for Irritable Bladder.—A man, aged 56, was admitted into King's College Hospital, suffering the symptoms of irritable bladder, the commencement of which dated five years back. He was compelled to pass his water every quarter of an hour, and suffered much pain before and during the act. The bladder had been examined for stone, but none had ever been detected. The urine was in a healthy condition. Under these circumstances Mr. Ferguson determined to try the effect of opening the neck of the bladder. Incisions almost exactly resembling those of lithotomy were accordingly made, and the case subsequently treated as one of stone. No calculus was found. Considerable bleeding followed the operation, but it was arrested, and the man has since done well. The distressing symptoms have been greatly relieved. The wound is now nearly healed, and all the urine flows by the penis.

Trephining of the Skull.—Both the patients whose cases were mentioned last month have since been discharged well.

A boy, aged 14, was admitted into St. Mary's Hospital, under the care of Mr. Haynes Walton, on account of a compound fracture, with depression of the left parietal

bone near its middle. The injury had been occasioned by a brick, which had fallen on to the head from a height of fifty feet. There were no symptoms of compression, and the dura mater was not lacerated. By means of Hey's saw a portion of overhanging bone was cut away, and the depressed fragment was then raised into its place. Doing well.

Herniotomy.—*Case No. 6 of last month.* In this, a woman under Mr. Ward's care, in the London Hospital, suffered from an artificial anus, after an operation for femoral hernia. The discharge of feces continued solely from the wound, until the 27th day, after which it gradually ceased, and the latter is now quite healed. The woman has regained her health, and the bowels act spontaneously. Recovered.

Number of cases, 6; recovered, 3; under treatment, 1; died, 2.

Case 1. A man, aged 33, under the care of Mr. Paget, in St. Bartholomew's Hospital, on account of an inguinal hernia of fourteen years' standing. Strangulation had existed fourteen hours, symptoms severe. Reduction could not be effected until the sac was opened, the neck of the latter constituting the stricture. The sac contained much dark serum. Recovery, without a bad symptom. *Case 2.* A woman, aged 60, under the care of Mr. Haynes Walton, in St. Mary's Hospital. The hernia was femoral, and had been irreducible for six years. Symptoms of strangulation had been present for two days, and had followed a sudden increase in size of the tumour. There had been vomiting and constipation, and the tumour was tender and the abdomen tense. The sac was not opened. Recovered. *Case 3.* A boy, aged 16 months, under the care of Mr. Gowland, in the London Hospital, on account of congenital hernia. The tumour was the size of an egg, and had been strangulated thirty hours. The infant had been brought to the hospital on the previous day, and reduction attempted in vain; but there being then no urgent symptoms, the operation was deferred. During the night, however, there had been vomiting. The symptoms were not very severe, but Mr. Luke and Mr. Gowland having both failed in their attempts at taxis, it was decided to operate. The sac was not opened. Recovered well. *Case 4.* A woman, aged 56, under the care of Mr. Cock, in Guy's Hospital. Hernia femoral, strangulated forty hours, the size of

a pigeon's egg. The symptoms were acute and severe. The sac was not opened. Some bleeding followed the division of the stricture, and it was needful to plug the wound with sponge in order to control it. The symptoms were at once greatly relieved, but, during the next few days, the belly remained full, and there was a tendency to vomiting. Calomel and opium were employed. On the fourth day the bowels acted after an enema. On the seventh day the bowels had acted freely, and all tension of the abdomen had disappeared; the wound, however, was sloughy. On the eighth day a profuse discharge of what appeared to be the contents of the small intestine took place. The escape of feces by the artificial anus continued, and, a fortnight later, a mass of sloughy omentum was discharged. The passage per anum continued throughout to occur occasionally, showing that the canal of the gut was not occluded. At present the artificial opening is all but closed, and the woman is in a fair way for recovery.

Case 5. A woman, aged 65, under Mr. Cock's care, in Guy's Hospital, on account of a femoral hernia four days strangulated. The abdomen was tense and tender, and there were from the first the signs of existing peritonitis. Reduction could not be effected until the sac had been opened. The bowel was found sticky with lymph, and slightly adherent, there being no fluid whatever in the sac. Great difficulty was encountered in returning the bowel without also allowing the sac to slip up, and the latter had to be held *in situ* by forceps during the reduction. The bowels never acted, and death from general peritonitis occurred on the fourth day. The autopsy showed the effects of acute peritonitis, and, in the strangulated portion was a pinhole aperture, through which, however, no escape of feces had taken place.

Case 6. Of this case, in which, after the usual operation for femoral hernia, death occurred, we have not been able to obtain any particulars.

Amputations.—The cases left under care by last month's report have either recovered or remain under treatment.

Number of cases, 10; recovered, 6; under treatment, 2; died, 2.

Of the Thigh.—*Case 1.* A woman, aged 47, under the care of Mr. Curling, in the London Hospital, on account of a contracted knee. In June, 1852, this patient had (under Mr. Paget's care, in St. Barthol-

mew's Hospital) an abscess in the lower part of the thigh opened, which had occasioned very peculiar symptoms. (See *Medical Times and Gazette*, July 10, 1852, page 38.) The wound afterwards was, for some time, very unhealthy, and ultimately she left the hospital, before it was quite healed. Soon after her return home, sloughing phagedæna attacked the sore, and for this she was shortly after admitted into St. Thomas's Hospital, under Mr. McMurdo's care. The phagedæna was extensive and severe, and repeated consultations were held respecting the propriety of amputating; the question being decided in the negative, only because of the woman's extreme debility. For two months or more she was not expected to recover. At length, however, the wound slowly healed. Since then, her limb has been quite useless on account of the contraction of the knee, and she now sought admission into the London Hospital, in order to have it removed. Mr. Curling amputated through the middle of the thigh, cutting his flap chiefly from the outer and posterior aspects, as these were the only parts not involved in cicatrix. During the fortnight following the operation the woman was feeble, and the aspect of the stump was bad, on account of protrusion of the bone. No sloughing, however, occurred, and by careful management the soft parts were brought forward so as to cover the bone. The stump is now nearly healed, and the woman's health good.

Case 2. A boy, aged 5, under the care of Mr. Lawrence, in St. Bartholomew's Hospital, on account of diseased knee-joint of twelve months' duration. He was very feeble, and there were large collections of matter in the thigh. By careful preparatory treatment, good diet, etc., he was got into a state of health sufficiently improved to bear the operation. He recovered well.

Case 3. A strumous boy, aged 13, under the care of Mr. Coulson, in St. Mary's Hospital, on account of diseased knee and ankle-joint in the same limb. Amputation through the thigh. Doing well.

Case 4. A man, aged 33, under Mr. Ferguson's care in King's College Hospital, on account of medullary cancer of the lower part of the femur. The disease had existed fifteen months, and had rapidly advanced during the last two. The man had lost much flesh, and was cachectic. Amputation by double flaps was performed, about two inches below the trochanter. Very lit-

the blood was lost. Death from exhaustion occurred on the second day. Excepting a fatty condition of the heart, the autopsy showed nothing remarkable. *Case 5.* A man, aged 23, under the care of Mr. Callaway, in Guy's Hospital, on account of compound fractures of both legs. He was a railway ticket-collector, of temperate habits, and, before the accident, in excellent health. The injury had caused severe collapse. As soon as reaction was commencing (about twelve hours after the accident), primary amputation of the right thigh was performed; the injury on that side being much the more severe. The man sank, and died of exhaustion about forty-eight hours after the operation.

Of the Leg.—Case 6. A lad, aged 15, under the care of Mr. Cock, in Guy's Hospital, on account of acute disorganizing disease of the ankle-joint. The disease had existed but two months, but it had reduced the boy to so extreme a condition of emaciation and debility, that it was feared he would not live through the operation. There had been most profuse discharge. The amputation was by lateral flaps in the middle of the leg. The boy rallied well from the operation, and made a rapid and excellent recovery.

Of the Upper Extremity.—Case 7. A lad, aged 15, in excellent health, was admitted under the care of Mr. Ward, into the London Hospital, on account of a crushed hand. Primary amputation at the wrist-joint was performed, the chief flap being obtained from the palm. The stump healed without any abscess, and was sound on the twentieth day. The boy possesses good power of pronation and supination. *Case 8.* A lad, aged 12, was admitted into St. Bartholomew's Hospital, under the care of Mr. Lawrence, on account of a crushed hand. It was necessary to remove at once all the fingers, with their metacarpal bones, but, as the thumb was uninjured, an attempt was made to preserve it. The soft parts proved, however, to have been too much bruised, and such an amount of sloughing followed as exposed the bones, and rendered a secondary amputation through the forearm necessary. This was performed two weeks after the accident, the lad then being in good condition, and the wounds granulating. Recovered well. *Case 9.* A man, aged 43, in good health, admitted, under the care of Mr. Cock, into Guy's Hospital, his hand

having been cut off by a circular saw. Primary amputation through the forearm. Recovered. *Case 10.* A girl, aged 14, in fair health, under the care of Mr. Canton, in Charing-Cross Hospital, on account of diseased elbow-joint, the consequence of an injury received ten weeks before admission. The humerus being diseased to within three inches of the shoulder joint, amputation at that part was performed. The patient recovered quickly.

*Excision of Joints.—*A girl, aged 17, under the care of Mr. Hancock, in the Charing-Cross Hospital, on account of diseased elbow-joint. She was in a condition of health quite favourable to the operation, and excision of the articulation was accordingly performed in the usual manner. Her progress afterwards was good for ten days, when she was seized with the symptoms of acute pneumonia, from which she died on the fourteenth day. No autopsy was permitted.

*Removal of the Testis.—*A healthy-looking man, aged 18, was admitted, under the care of Mr. Coulson, into St. Mary's Hospital, on account of considerable enlargement of the right testicle. The disease was believed to have existed only two months, and had only occasioned slight pain at intervals. The gland was about the size of a goose's egg, smooth, with a tight, elastic feel, but without fluctuation. The cord was not affected. The scrotum was red, and a little inflamed. After a fair trial of mercurial and iodine treatment, the removal of the gland was decided upon. After the operation, the patient had an attack of scarlet fever, from which, however, he recovered well. The wound soon healed. The disease proved to be cystic sarcoma, and involved the greater part of the gland.

Removal of Malignant Tumours.—Case 1. A man, aged 36, under the care of Mr. Fergusson, in King's College Hospital, on account of cancer of the scrotum, of fifteen months' duration. The disease involved the whole of the front part, and extended backwards, leaving a deep hollow between the testes. The whole was excised, and the edges of the wound, brought together by sutures. Doing well. *Case 2.* A man, aged 47, in good health, under Mr. Fergusson's care in King's College Hospital, on account of epithelial cancer of the lower lip, of six months' duration. The man had never been a smoker. Excision by the V-shaped

incision, the wound being subsequently united by needles. Recovery, with extremely little deformity. *Case 3.* A woman, aged 54, under the care of Mr. Cock, in Guy's Hospital, on account of a reappearance of cancer in the cicatrix after partial excision of the breast. The first operation had been performed ten years ago, when a well-characterized mass of scirrhus was removed, together with the upper half of the mammary gland. For nine years she remained quite well, but during the last year some scirrhous nodules in the cicatrix had been slowly developing. The operation consisted in excising the cicatricial tissues and neighbouring skin. Recovered. *Case 4.* A man, aged 56, under care in St. Bartholomew's Hospital, on account of an ulcerated epithelial cancer of the upper lip. The excision was performed by Mr. Jowers (House-Surgeon), a large triangular portion being cut away. The wound was united by hare-lip pins, and was quite healed in a week. *Case 5.* A delicate and nervous woman, aged about 45, under the care of Mr. Lloyd, in St. Bartholomew's Hospital, on account of a scirrhous tumour in the breast, with enlarged axillary glands. The operation was performed by Mr. Jowers (House-Surgeon), and consisted in the removal of the entire breast, and of the affected glands. The wound was, necessarily, large, the dissection extending into the axilla. The woman was not hopeful, and, before the operation, had expressed an opinion that she should not recover. A few days after the operation she was attacked by feverishness, symptoms of cerebral irritation, and from these she died at the end of a fortnight. No autopsy permitted. *Case 6.* A man, aged 44, in fair health, under the care of Mr. Lloyd, in St. Bartholomew's Hospital, on account of extensive cancerous ulceration of the lower lip. The diseased part was freely excised. For five days following the operation the man did well, but subsequently an attack of erysipelas occurred, which was attended by a general eruption, resembling scarlet fever, and from which he died. *Case 7.* A man, aged 50, under Mr. Lloyd's care, in St. Bartholomew's Hospital, on account of epithelial cancer, involving the right angle of the mouth, and large portions of both upper and lower lips. The diseased parts were excised, and the edges of the wound united. The wound did not heal, and is already extensively involved in a re-

turn of the disease. *Case 8.* A man, aged 79, under care on account of an epithelial cancer of the lower lip. Excision. Recovery. *Case 9.* A stout, healthy man, aged 76, under the care of Mr. Lawrence, in St. Bartholomew's Hospital, on account of a cancerous growth, the size of an egg, on the right side of the forehead. It had grown in the cicatrix of a previous operation for the same disease, which was performed by Mr. Lawrence three years ago. The origin of the first growth was attributed by the man to a blow which he had received. At the former operation the disease was of epithelial character, but, on the present occasion, the section of the tumour presented also spots of melanosis. He recovered well. *Case 10.* A woman, aged 45, under the care of Mr. Lane, in St. Mary's Hospital, on account of returned scirrhous cancer in the cicatrix, left by the removal of the mammary gland, five years ago. There were numerous small tubercles, which, together with the adjacent skin, were dissected away. The wound healed quickly. *Case 11.* A man, aged 40, under the care of Mr. Spencer Smith, in St. Mary's Hospital, on account of epithelial cancer of the lip, of six months' duration. Excision. Recovery. *Case 12.* A man, aged 60, under the care of Mr. Callaway, in Guy's Hospital, on account of an epithelial cancer of the lip. It was of large size, and situated at the left angle of the mouth. After excision, the wound healed, but the man, having left the hospital, commenced again his habit of smoking, irritated the cicatrix, and caused it to again ulcerate. *Case 13.* A man, aged 44, somewhat cachectic, was admitted into Guy's Hospital, under the care of Mr. Callaway, on account of a large growth of medullary cancer from the axillary lymphatics. The tumour was the size of two fists. On the arm of the same side was a large congenital mole, which had recently ulcerated, and become painful. In the operation, the tumour was found to lie directly on the axillary vein, and a careful dissection was required. The man is now nearly well. Since the operation, the mole on the arm has healed, and has ceased to be painful.

Removal of Non-Malignant Tumours.—

Case 1. A man, aged 25, under the care of Mr. Birkett, in Guy's Hospital, on account of a very large erectile growth in the skin and subcutaneous tissue of the right side of the abdomen. It covered a space as large

as three hands outspread side by side, and had a thickness in parts of nearly two inches. It was of congenital origin, but had given no trouble until latterly, when it had increased in size, and become covered with small warts, or papillary growths, from which there had been much oozing of thin blood. By the continued drain of blood the man had been reduced to a state of great anemia. In the excision it was found to be united inseparably to the external oblique muscle, parts of which had to be removed with it. The dissection required great care, and was effected with but little loss of blood. The wound left was, necessarily, very large indeed. The man has done remarkably well since the operation, and may now be considered out of danger. The structure of the growth proved, after the operation, to resemble exactly that of the corpus spongiosum. *Case 2.* A pale, weakly woman, aged 39, under the care of Mr. Lawrence, in St. Bartholomew's Hospital, on account of a parotid tumour, about the size of an egg. It was of several years' growth, but had not until lately occasioned any pain. In the operation it was found to have deep attachments, and being adherent to the parotid, a portion of the latter was necessarily removed with it. Its structure was glandular. The patient recovered well. *Cases 3, 4, 5, and 6.* In these, fatty tumours of considerable size, were removed from various parts of the body. In all, the patients recovered well. *Case 7.* A woman, aged 22, under the care of Mr. Cock, in Guy's Hospital, on account of a small fibrous tumour on the capsule of the left mammary gland. It had been very painful and was accordingly excised, although so small that, after the operation, it scarcely appeared more than an indurated tissue. The wound soon healed, and the pain, hitherto, has not returned in the least. *Case 8.* A boy, aged 4, under Mr. Cock's care, in Guy's Hospital, on account of a mass of warts, as large as the fist, by the side of the anus. They were removed by curved scissors. Recovered. *Case 9.* A man, aged 44, under the care of Mr. Lane, in St. Mary's Hospital, on account of a fibrous tumour over the sacrum, believed to have been produced by a fall six years before. Excision. Doing well. *Case 10.* A girl, aged 17, under the care of Mr. Coulson, in St. Mary's Hospital, on account of a fibrous tumour in the breast, the size of a walnut. It had not been in the

least painful, but was increasing in size. *Excision. Recovery.* *Case 11.* A woman, aged 49, under care, on account of a large proliferous cystic tumour of the breast. It had been increasing for more than two years, and rapidly of late. *Excision. Recovery.* *Case 12.* A woman, aged 31, in good health, under the care of Mr. Hilton, in Guy's Hospital, on account of a "fungoid tumour" growing from the lower jaw and its gum. She was pregnant, and within a few months of confinement. The tumour was about the size of half a walnut. In the operation, it was found necessary to gouge out the bone at the affected spot, and afterwards to apply the actual cautery to arrest hemorrhage. The wound soon healed. *Case 13.* A man, aged 35, under Mr. Callaway's care, in Guy's Hospital, on account of a large indurated bursa in front of the left patella. It was necessary to excise it, and in order to avoid having a cicatrix directly in front, which would have prevented kneeling, Mr. Callaway made a curved incision over the inner side of the joint, and dissected outwards the flap. Owing to the occurrence of some secondary hemorrhage, it was necessary to open the wound, and the healing has not, therefore, been as rapid as could have been wished; it is, however, progressing favourably. *Case 14.* A woman, aged 19, under Mr. Callaway's care, in Guy's Hospital, on account of a small fibrous tumour over the side of the os calcis. *Excision. Recovery.*

Removal of Necrosed Bone.—Nine operations of this class have been performed during the month, and in all the patients are doing well. The three following have points of interest which require special mention. *Case 1.* A boy, aged 8, of strumous aspect, under the care of Mr. Hilton, in Guy's Hospital, on account of disease of the os calcis, of a year's duration. A sinus led down to diseased bone. The operation consisted in dissecting up the soft parts, and then, as a small sinus was found entering into the bone, employing the gouge so as to lay open the cavity. In the latter was found a small fragment of dead and loose bone about the size of a bean, which was easily removed. The wound was left open, and has since done well. *Case 2.* An artilleryman, aged 23, under the care of Mr. Birkett, in Guy's Hospital. In March last, while engaged in the trenches before Sebastopol, he had been struck by a ball, which

fractured his right radius, with much splintering. The fracture had since united, but there remained near its site some loose fragments of dead bone. These Mr. Birkett removed, and the case has since done well. The portions of bone taken out were quite smooth, and looked just as splinters from a prepared bone would do, not having undergone any action from the tissues with which they had lain in contact. *Case 3.* A man, aged 45, under the care of Mr. Hutchinson, in the Metropolitan Free Hospital, whose case has been several times mentioned in these Reports. In January last his left elbow-joint was excised. Subsequently, acute inflammation of the whole shaft of the ulna, inducing necrosis and extending into the wrist-joint, occurred. In June the lower fifth of the ulna, including its styloid process, and the whole articular extremity, was excised. At the same time the wrist-joint, which was of necessity opened, was examined, but none of the other bones were found diseased. Both wrist and elbow-joints healed well after the respective operations. There remained, however, the shaft of the ulna, which, extending from below the coronoid process above, to the spot where the lower fifth had separated below, was quite dead, and surrounded by a shell of new bone. The operation performed this month consisted in the removal of this portion, which was accomplished easily after its inclosing shell had been freely opened. The man has since been discharged from the hospital. Both elbow and wrist-joints are in a state of false ankylosis, and do not at present permit of much motion; but the latter improves in its mobility each week, and it is hoped that a useful arm will yet be obtained.

Trephining of Bones for Abscess, etc.—

Case 1. A man, aged 20, under the care of Mr. Hilton, in Guy's Hospital. For four years past, he had been liable to severe pain in the lower part of the left tibia, at which part the bone was decidedly thickened. Suspecting the existence of abscess, Mr. Hilton cut down over the most painful spot, and trephined. No pus was seen, but the bone was found much thickened and hardened. Since the operation, the man has had no return of pain, and the wound is now nearly healed. *Case 2.* A girl, aged 10, under the care of Mr. Hutchinson, in the Metropolitan Free Hospital. The lower part of the left tibia was considerably en-

larged in all its dimensions, and there was a small sinus, which passed in on the inner side to the posterior aspect of the bone, about an inch above the ankle-joint. The presence of a portion of necrosed bone was suspected. The disease had existed for eighteen months, and dated from an illness in which extreme pain in the bone was the chief symptom. Subsequently an abscess formed and broke, and left the sinus still existing. There had been throughout frequently recurring attacks of violent pain, which were generally preceded by comparative arrest of the discharge, and followed by an increased flow. The operation consisted in enlarging the sinus by a vertical incision, which done, it was found that a probe might be passed into a large cavity in the bone through a very small aperture. As this opening lay at the back of the bone, and in close proximity to the tibial vessels, tendons, etc., it was now determined to make a second opening into the cavity from the front. This was done with a small trephine. A piece of dead bone, about the size of a bean, was found, but the abscess cavity in which it lay would have easily contained a large walnut. The bone was greatly thickened. Since the operation, the girl has been quite free from pain; the wounds are healing, and she is now allowed to walk about.

Tracheotomy and Laryngotomy.—

Mr. Fergusson's patient, on whom tracheotomy had been performed, as mentioned in last month's report, has since been discharged well. The patient in St. Mary's, under the care of Mr. Lane, for whom laryngotomy had been performed on account of chronic laryngitis, has since died of phthisis. During the month tracheotomy has been performed in two cases under circumstances of peculiar interest. *Case 1.* A boy, aged 3, was admitted into King's College Hospital, with the account that he had just swallowed a small black round shoe-button, having a short piece of string attached. He was brought in within ten minutes of the accident, and was then on the point of death from suffocation, being cold, pulseless, and blue in the face. The button could not be found by examination through the mouth, and Mr. Tutin, the House-Surgeon, accordingly performed tracheotomy at once. The child soon revived after the opening in the trachea had been made. The button could not be found, and up to the thirteenth day

(time of report) had not been discovered, although several examinations had been made with that object. The child is doing well, but cannot breathe when the opening in the trachea is closed, the inference being that the foreign body still occupies the larynx. *Case 2.* J. M., aged 5, was admitted into Guy's Hospital, on account of great difficulty of breathing, consequent on the swallowing of a plum-stone. The stone had been ground so as to make a whistle, and with this the boy was in the act of whistling, when a blow from his mother on the back caused him to make a spasmodic inspiration, during which it was swallowed. Immediately afterwards he was seized with great difficulty of breathing, and inability to cough. In the absence of Mr. Callaway, Mr. Cooper Forster was called to him at the hospital, about half an hour after the accident. He was then lying on the right side, breathing laboriously, and making frequent ineffectual attempts to cough. The countenance was livid, the extremities were cold, and the pulse very feeble. Over the chest was a remarkable condition of puffiness, attended by crackling on pressure, as if from subcutaneous emphysema. Any attempts at movement brought on great dyspnoea, but whilst lying quiet the breathing was not attended by any gasping effort. The signs being deemed conclusive as to the presence of the foreign body in the windpipe, tracheotomy was at once performed. The third and fourth rings of the trachea were divided, and but little hemorrhage was encountered. Almost immediately after the opening had been made, a coughing effort threw the stone out into the wound. All the symptoms were immediately relieved. The wound was left open, simply covered with lint. Excepting a slight bronchitis, for which no special treatment was required, the boy made an interrupted recovery. On the fourteenth day after the operation he left the hospital, the wound quite healed, and well in every respect. A few days after the operation, a copious eruption of herpes about the mouth showed itself; but it disappeared spontaneously, and did not appear from the other symptoms to have depended on any pneumonic inflammation.

Operations for Urethral Stricture.—Case 1. A man, aged 50, under the care of Mr. Quain, in University College Hospital. Four years before he had bruised the perineum by falling astride a beam, after which

suppuration in the perineum and scrotum occurred. On admission, the perineum and scrotum were much indurated by solid oedema, and several sinuses opened into the former. There were two strictures, one in the penis and the other in the perineum. A staff having been passed through the anterior one, and down to the further one, an opening was made into the urethra in the perineum, and a second in the penis. The anterior stricture was cut through, but not the posterior one. This operation was performed in July. In August, Mr. Quain again operated, and having divided the posterior stricture, succeeded in passing a catheter into the bladder. The man is now progressing favourably. *Case 2.* A man, aged 33, under the care of Mr. Quain, in University College Hospital, on account of old-standing stricture. An instrument was passed through it, and perineal section performed. Doing well. *Case 3.* A man, aged 33, under the care of Mr. Marshall, in University College Hospital, with stricture of six months' duration. The stricture had followed an injury inflicted three years before, which had caused abscess in the perineum, but the symptoms of stricture had been present only six months. When admitted, No. 1 could not be passed, but before the operation Mr. Marshall succeeded in dilating until No. 4 was admitted. Perineal section was performed, and No. 7 subsequently left in for 48 hours. Under treatment.

Puncture of the Bladder.—A man, aged 63, was admitted into St. Bartholomew's Hospital, under the care of Mr. Lloyd, on account of retention of urine. He had suffered from stricture for twenty-seven years, and had been subjected to much treatment. It was thought probable that for a long time he had been unable to empty his bladder, as, although the retention had only been complete for about twenty hours, yet the bladder was enormously distended, and reached nearly to the umbilicus. The hypogastrium was tender, and the man was suffering very much, but there were no signs of uræmic poisoning, and his general health was good. A persevering trial of instruments, on the part both of Mr. Lloyd and his House-Surgeon, failed. A No. 10 could be easily passed to the prostatic region, but, on reaching that part, it turned to the left, and could not be made to enter the bladder. Under these circumstances, puncture of the

bladder, above the pubes, was performed. The man was at once relieved, and has had no bad symptoms since. He remains under treatment, nearly all the urine still passing by the artificial opening.

Plastic Operations.—*Case 1.* A girl, aged 18, under Mr. Fergusson's care, in King's College Hospital, on account of a small cleft in the soft palate which had remained after a partially successful operation performed a year ago. It was closed in the usual way, and united perfectly. *Cases 2 and 3.* Single harelips operated on in the usual way with perfect success. Pins used. *Case 4.* A man, aged 40, under the care of Mr. Fergusson, in King's College Hospital, on account of fungous protrusion from the testis. The man was phthisical and in poor health. The disease had resulted from a kick received ten months ago. The operation consisted in dissecting up the edges of the ulcer and the scrotum, paring them and uniting them by sutures over the protruded mass. The sutures gave way and only partial union was obtained. The case is, however, doing fairly. *Case 5.* A girl, aged 17, under the care of Mr. Haynes Walton, in St. Mary's Hospital, on account of cleft palate. She was extremely nervous and wanting in self-control, and the operation was accordingly performed under the influence of chloroform. Excessive vomiting followed. The edges of the wound sloughed, and no union was obtained. *Case 6.* A young woman, aged 21, under the care of Mr. Haynes Walton, in St. Mary's Hospital, on account of a cleft palate. Chloroform was not used. The edges of the wound sloughed, and the operation was unsuccessful. *Case 7.* A woman, aged 64, under the care of Mr. Hutchinson, in the Metropolitan Free Hospital, on account of prolapsus of the uterus, with vaginal rectocele, and some degree of prolapse of the bladder. The uterus was constantly down between the thighs when in the erect position, and there was a large ulcer on its neck. The condition had existed, in spite of much treatment, for fourteen years, and was becoming more and more troublesome. There appeared to have been formerly a rent in the commissure of the perineum, but it had not involved any large extent of that structure. The woman had borne many children. The operation performed consisted in dissecting away the mucous membrane from the opposite sides of the vulva, and the commissure of the perineum, and

then uniting the raw surfaces by the quilled suture. A large fatty tumour, from the side of the abdomen, was removed at the same time. The patient recovered well, and both wounds were healed in about a fortnight. The whole external aperture of the vulva is now closed by a thick cicatrix, excepting a length of about an inch and a half in front. Sufficient room is left for the exposure of the meatus urinarius, and the woman makes water without much difficulty. She has been up for the past three weeks, and has not suffered from any return of the prolapse.—*Med. Times and Gazette*, Sept. 29, 1855.

MEDICAL NEWS.

DOMESTIC INTELLIGENCE.

Quarantine and Yellow Fever at Natchez.

—One of the most interesting and important circumstances connected with the history of yellow fever is its recent appearance at Natchez, Miss. Having suffered from this scourge in 1853 to an extent truly appalling, the community, instigated by one of their most able and accomplished physicians, determined on the establishment of quarantine during the summer of 1854, hoping thus to preserve the health of their city. All accounts would lead us to infer that this quarantine was as rigidly enforced as human efforts would admit of. Natchez escaped an epidemic, and the existence of even a single case during the season was never officially announced or admitted, so far as we are aware. We must not omit to say, however, that one or more of the most intelligent of the Faculty declared the existence of one or more palpable cases, and, if we mistake not, there was considerable excitement, and, perhaps, asperity of feeling exhibited by our brethren there through the medium of the newspapers. The absence of anything approaching an epidemic, however, satisfied the community, and they were convinced that they had found in quarantine a guardian angel for all future time.

As soon as yellow fever was announced in New Orleans this summer, the City Council of Natchez determined on the re-establishment of quarantine, and all accounts tend to show that the same was, if possible, more

rigidly enforced than it was in 1854. What has been the unhappy result? The following extract from a Natchez paper will show:—

"**BOARD OF HEALTH.**—*City Hall*, Sept. 8, 1855.—At a called meeting of the Board of Health, held this day, at 3 o'clock P. M.—present, R. W. Wood, Esq., Mayor; Dr. L. P. Blackburn, Health Officer; Messrs. Barnes and Doniphan—the following report of Dr. Blackburn, was submitted, which, on motion of Mr. Doniphan, was adopted:—

"*To the Board of Health of the City of Natchez:*—Gentlemen: It becomes my painful duty to announce to you the existence of yellow fever in our city.

"Yours respectfully,

"L. P. BLACKBURN,

"Health Officer."

"The following preamble and resolutions of Mr. Doniphan were, on motion of Dr. Blackburn, unanimously adopted:—

"The City Council, with commendable diligence, as soon as yellow fever was announced in New Orleans, established, and have continued to enforce rigidly, the quarantine laws against all boats and their passengers from infected ports, and have, also, had an armed guard on the roads leading to the city, as well as a secret police to detect infractions of the law, and have done everything in their power to keep Natchez free from exotic yellow fever; notwithstanding all which, it is in our midst, and threatening to become epidemic:

"*Therefore resolved*, That the yellow fever now existing among us is a visitation of an All-wise Providence, against which the most judicious human efforts have been unavailing; and while we deplore the fact, we feel it our duty to make it known to our citizens, that they may take such measures to avoid the infected atmosphere as they may deem advisable.

"*Resolved*, That the proceedings of this Board be published in handbill form and posted on the streets, and also inserted in the papers on Tuesday.

"On motion, the Board then adjourned.

"WM. H. STEWART,

"Secretary of Board of Health."

We must say that we most heartily sympathize with the community of Natchez, both in their distress and their disappointment, and we sincerely trust that their sufferings this season may be very limited. It

is a matter of sincere regret that we have to cite their city as an instance of the failure of rigid quarantine to prevent the ravages of yellow fever. The non-existence of yellow fever in Natchez last year (taking only official announcement), was negative evidence in favour of quarantine; the existence of yellow fever this year, is affirmative evidence against it. Is it to be tried again?—*New Orleans Medical News and Hospital Gazette*, October 1, 1855.

Transactions of the American Medical Association.—We ought, in our last number, to have announced the publication of the eighth volume of this work. It is a highly interesting and handsomely got up volume, of 763 pages.

We will take this opportunity to call attention to a few typographical errors, for which, however, the Committee of Publication are not responsible, the proof-sheets having been read by the author of these papers.

In Dr. Hamilton's interesting paper, on page 436, 19th line from the top, for the word "able," read "unable."

In Dr. Traak's prize essay, on page 640, 10th line from bottom, for "60 per cent." read "21 per cent."

Page 664, line 8th and 9th from top, for "1 moderate in 9.5 severe, &c.," and "1 moderate in 6.5 severe, &c.," read "1 moderate in a little less than 11 of the whole," and "1 moderate in 5½ of the whole."

Page 675, line 9th from bottom, for "37," read "35."

Page 675, line 8th from bottom, for "23 per cent." read "21 per cent."

Medical Society of the State of Pennsylvania.—We invite the attention of the profession throughout the State to the following circular directed to be issued at the last meeting of the State Society:—

PHILADELPHIA, November, 1855.

DEAR DOCTOR—At the last meeting of the Pennsylvania State Medical Society the following resolution was adopted:—

"*Resolved*, That the Corresponding Secretary be, and he is hereby instructed to address a circular to the prominent physicians in those portions of the State in which no County Medical Societies exist, urging upon them the importance of organizing such societies without delay."

In this age, the influence of associated

action is invoked by every class of the community which has interests to protect, or objects to accomplish; it cannot, therefore, be regarded as singular, that physicians should seek its aid to protect the interests of their profession, which, in this State, the law leaves entirely unguarded.

We do not ask your assistance to obtain legislative protection, but we earnestly urge you to assist us in protecting ourselves; organize a County Medical Society without delay, enroll the names of the educated, moral, and regular physicians, and exclude from the brotherhood the ignorant, the irregular, and the unprincipled; then will your brethren at a distance know to whom to apply for advice and assistance, and will co-operate with you in all measures calculated to extend the usefulness of our high calling, and to elevate, dignify, and adorn it. Bring to your County Society the results of your observations and experience in medicine and its kindred sciences; collate them and send them to the State Society for common improvement, and receive in return the observations and experience of physicians in other parts of the State; thus will we all be benefited, and much valuable information be preserved and circulated.

The scandal of our profession is, and always has been, that physicians not only differ in their treatment of disease, but that they do not live together in social harmony. The formation of a County Society leads to more frequent professional and social intercourse, and thus elevates the character of the profession by discouraging the spirit of ungenerous rivalry, reconciling enemies, and healing those differences which arise from misrepresentation or fancied injury.

Our annual reunions are, moreover, seasons of pleasure as well as profit, for in them, warm-hearted, accomplished, and distinguished physicians, from all parts of the State, meet in social as well as scientific fellowship.

The next meeting of the State Society will be held in Philadelphia, on the last Wednesday in May next, when we will be happy to receive you as a delegate or individual member from your county, and will endeavour to make your sojourn in the medical metropolis of the country as pleasant as possible.

Yours, very, respectfully,

THOS. H. YARDLEY,
Cor. Sec. of State Medical Society.

NOTE.—The objects of the Pennsylvania State Medical Society, as declared by the Constitution, are "the elevation of professional character; the protection of the interests of its members; the extension of the bounds of medical science; and the promotion of all measures adapted to the relief of suffering, and to improve the health and protect the lives of the community."

The members consist of ASSOCIATES and DELEGATES; every member of a properly organized County Society is an associate; the delegates are elected by the County Societies in the proportion of one to every five of its members; but every County Society, however small, is entitled to one delegate.

The delegates meet annually, to transact the business of the Society. The first meeting was held in the City of Reading, in 1849, at which only ten County Societies were represented; now twenty-five counties have formed Societies, and we hope at the next meeting to have delegates from every county in the State.

A volume of the *Transactions* is published annually, containing the names of the officers and members of the County Societies, their reports, and much other valuable information. A few volumes of these *Transactions* remain on hand, and will be forwarded to the address of any physician who is willing to take the first step for the formation of a County Society; or any other information on the subject will be given on application to

THOS. H. YARDLEY,

No. 381 Arch Street, Philadelphia.

Notice of the Committee on Prize Essays for 1856, of the American Medical Association.—At a meeting of the American Medical Association, held in Philadelphia, May, 1855, the undersigned were appointed a Committee to receive voluntary communications on medical subjects, and award prizes in accordance with the regulations of that body.

Each communication intended to compete for a prize, must be accompanied by a sealed packet containing the name of the author, and marked exteriorly by a sentence or motto corresponding with one upon the essay; which packet will not be opened unless the essay belonging to it has a prize awarded.

All such communications must be ad-

dressed to the Chairman of the Committee, at Ann Arbor, Michigan, before March 20, 1856.

A. B. PALMER, M. D., *Chairman.*

A. R. TERRY, M. D.,

S. H. DOUGLASS, M. D.,

S. DENTON, M. D.,

A. SAGER, M. D.,

C. L. FORD, M. D.,

E. ANDREWS, M. D.

Virginia Medical Journal.—On the 1st of January next "*The Stethoscope*" will be united with "*The Virginia Medical and Surgical Journal*," and will appear under the name of the *Virginia Medical Journal*. This journal will be under the editorial management of Dr. McCaw, of Richmond, and Dr. Peebles, of Petersburg, with the aid of Dr. Otis as corresponding editor.

OBITUARY RECORD.—It is with profound regret that we record the death of THEODORE ROMEYN BECK, which occurred at Albany, on the 19th of November last, in the 65th year of his age.

"Dr. Beck was born in Schenectady, August 11, 1791; in 1807 he graduated at Union College, and soon afterwards commenced his medical studies with Drs. McClelland and Law, at Albany, and subsequently entered the office of the late Dr. David Hosack, of this city. In 1811, he graduated at the College of Physicians and Surgeons, the subject of his Thesis being Insanity. In 1815, he was appointed Professor of the Institutes of Medicine, and Lecturer on Medical Jurisprudence in the College of Physicians and Surgeons in Western New York. In 1817, owing to ill health, he retired from the general practice of medicine. Dr. B. was Secretary of the Board of Regents of the University of the State of New York, and one of the managers of the State Lunatic Asylum, at the time of his death, and for some time the editor of the *American Journal of Insanity*. He was also a regular and valuable contributor to the pages of the *American Journal of Sciences*. In 1823, he published the first edition of his work on Medical Jurisprudence; the eighth edition of which, much enlarged, was not long since issued from the press. Thus has passed from our midst the last of this talented family."—*New York Medical Times*, Dec. 1855.

FOREIGN INTELLIGENCE.

Registration of Marriages, Births, and Deaths.—[We invite attention to the following editorial remarks in the *Medical Times and Gazette* (Dec. 8, 1855), relative to the Registrar-General's Returns of Births, Marriages, and Deaths in Great Britain. It is to be lamented, that in this country so much apathy exists as to this important means of ascertaining the influences which tend to shorten life in certain localities, and the measures by which they may be removed. In but few of the States do there exist laws for this object, and we feel mortified to say that the legislature of the State of Pennsylvania, at its last session, took the disgraceful backward step of repealing the registration law enacted a few years before.]

"The scientific value of these quarterly returns is constantly augmented by the introduction of every element which is supposed to influence the public health. Apart from the results with which the various tables are accompanied, we anticipate from the use of these materials, by various members of the profession, a very great contribution to hygienic science. They furnish the raw material which will go to build up true and important theories; they serve to demolish fanciful and incorrect hypotheses; and, at the same time, attract the attention of medical men to questions vitally important to themselves and the whole community.

"As we have before shown, the health of the country during the last three months shows a striking improvement on the returns of the corresponding period of last year. Our labouring classes have, through the operations of the poor-laws, notwithstanding the imperfect manner in which they are administered, been shielded from much of the suffering which has been experienced by the labouring classes in other countries; and we trust that the new vestrymen, who have just been elected under the Metropolis Local Management Act, will watch with scrupulous care over the interests confided to them during the inclemency of winter.

"In the valuable notes of the district registrars, evidence is furnished from all parts of England on the relation between a satisfactory state of public health and proper attention to the various influences by

which it is affected, and which are subject to our own control; and the clergy of every church would greatly assist the sanitary movement, if they would make it a prominent part of their mission to demonstrate to the people, that they are opposing the Divine laws, natural and positive, by the neglect of personal and domestic cleanliness, and that they are conforming to the Divine mind by removing the causes of unnecessary disease and premature death from themselves and those who surround them. The important notices to which we refer, furnish further evidence (if such were wanting) of the criminal waste of infantile life in the country districts, from the neglect of adequate medical assistance. The following statement calls for the most serious consideration. Thus, in *Wrexham*, the births were 139; deaths, 72. The deaths were about the average, and included 4 cases of whooping-cough without medical attendance. Out of 37 children who had died of the age of 1 hour to 4 years, only 15 had medical attendance. One reason assigned for this is, 'the fear of the medical charges; another reason is, that many women, such as mechanics' and labourer's wives, prefer the old nurse-women to a medical practitioner.'

"Facts of this kind are a disgrace to our country, reflecting as they do most seriously on the parochial authorities in whose jurisdiction they are permitted to occur, and pointing to facts of a most alarming character, demanding a searching investigation, which we hope the Registrar-General will find some means of effecting; while the subject deeply concerns the profession whose aid is rejected in favour of 'old nurse-women.'"

Diuretics in Renal Dropsy.—The question as to whether diuretics should be employed in the treatment of those cases of dropsy which from the condition of the urine are known to depend upon diseased kidney, is one of great practical importance. Our readers may be glad to know the opinion of so excellent a physician as Dr. Burrows, respecting it. A few days ago, Dr. Burrows, at the bedside of a patient who was recovering from a very severe renal dropsy, made the following remarks:—"I wish, gentlemen, that you should notice the treatment which has been here pursued. I well recollect that long ago it used

to be Dr. Latham's observation that this form of dropsy was often very efficiently treated by the tartrate of potash. That salt was indeed his favourite remedy. Then came the addition to our pathological knowledge, and the announcement of the fact that the disease was essentially one of renal disorganization. From this it was thought to follow clearly that whatever stimulated or irritated the kidney must do harm. Diuretics consequently fell into almost universal disuse. Latterly, however, some of us are again coming back to the old practice; we find that no other remedies effect so much for the relief of the patient as diuretics, and we therefore prescribe the latter. The matter is one of experience, and my own is to the effect that the kidneys, though in a state of chronic disease, obey diuretics well, and that no inconveniences are produced." The prescription which the patient in this case had been taking was as follows: *R Potassæ tartrat. ℥ss., spirit. æther. nitr. ℥ss., aquæ piment. ʒi. Ft. haust. ter die.* The case was, of course, one of chronic dropsy, and the diagnosis as to its renal cause had depended upon the absence of cardiac disease, and the presence of a large quantity of albumen in the urine.—*Med. Times and Gaz.*, July 7, 1855.

External Use of Cod-Liver Oil in Skin Diseases.—Prof. MALMSTEN has just published in the *Allgemein Med. centr. Zeitung*, Nov. and Dec. 1854, a paper on the various uses of the fish oils, and more especially on their external employment against intractable skin diseases. The practice of the Swedish Physician appears to have been most successful; and amongst the cases narrated as having been cured are examples of chronic and impetiginoid eczema, impetigo, psoriasis, chronic pityriasis, and prurigo formicans. The plan adopted differs somewhat from what we have seen followed in this country. Instead of using the oil merely as an ordinary liniment, the affected parts are directed to be kept constantly soaked with it. If the whole skin be affected, the patient is made to lie in bed; all his body and bed linen being saturated with the oil. This system is continued until the skin is restored to health, the patient being allowed an alkaline bath once a week, but no other washing or change of clothes being permitted. To most people the disagreeable nature of such

a measure will constitute an almost insuperable objection to its use. We must remember, however, that Professor Malmsten assures us that he has cured, by its help, cases of the most obdurate and distressing kind. The treatment does not appear to have required, as a rule, more than about two weeks; and is said to have shown a wonderful influence in restoring flaccidity, clearness, and healthy colour to the diseased integument. The majority of cases of prurigo formicans baffle, we suspect, the skill of all our English Dermatologists; and in these the patients would generally be found willing to accept a cure by any possible method, without regard to its disagreeableness. Although this author incurs a little suspicion from the rather indiscriminate recommendation of his remedy, yet, on the whole, we think, he well supports his assertions. Speaking generally of his facts, they appear to us to bear out the conclusions which we expressed in the former report on this subject, and which we will again quote: "The class of cases for which the oil seems most applicable is that of chronic eczematous eruptions, unattended by acute inflammation or general pyrexia. In abating the troublesome itching, which frequently accompanies this disease, especially in old people, it has manifested powers superior to those of any other application with which we are acquainted."—*Med. Times and Gaz.*, July 7, 1855.

Local Use of Iodine.—Dr. MIKSHIK states, that he has derived great advantage from the tincture of iodine, as an emmenagogue, applying it externally to the os uteri. Cases which had long resisted all other means, have yielded to the application after the third day. He has not found the advantages that Boinet says attends its use in vaginal catarrh, and from the temporary irritation it produces, it should be avoided in pregnancy, and when the uterus is inflamed. As a means of dispersing organic exudations he much prefers lotions (iod. potass. ʒj, iodin. gr. x, aquæ ℥j) to ointments. They should be applied on compresses which are to be covered by a cataplasm.—*Wien Wochenschrift*, 1855.

Sweet Whey in Pertussis.—Dr. LOWENTHAL states, as the result of numerous trials, that this substance given several times a day in doses beginning with half a spoonful,

cures the disease more rapidly and more pleasantly than any other means.

Sanitary State of Scotland during October, 1855.—From the Registrar-General's returns it appears that during October, in the three principal towns in Scotland, the births have been at the rate of 1 for every 27; the deaths, 1 for every 23; and the marriages, 1 for every 126 persons. The deaths were 1625; of which 810, or 49 per cent., were under 5 years of age. The deaths from zymotic diseases constituted 28 per cent. of the total mortality. In Dundee, 12 per cent. of the total deaths were from smallpox. Scarlet fever has been very fatal in Edinburgh and Aberdeen. In each of these towns, 14 per cent. of the total mortality has been caused by scarlet fever. The epidemic, which during the present month has increased over a larger area of the town, is said by those in active practice to be one of the most severe and typhus-like in its character with which we have been afflicted for years. There is no epidemic puerperal fever either in Edinburgh or Aberdeen; but in Glasgow, where there is no scarlet fever, there have been four deaths from that disease. Croup has been unusually prevalent. In Glasgow, 17 died of it; in Dundee, 6; in Edinburgh, 4.

The following is the proportion of deaths in the different towns, in which no medical man would appear to have been consulted during the last illness:—

Leith	4 per cent.
Edinburgh & Perth	12 "
Aberdeen	14 "
Glasgow	19 "
Dundee	22 "
Paisley	37 "
Greenock	39 "

From this table are excluded all the cases of sudden death, as well as all those where the Registrars have noted that the party received casual relief at dispensaries, druggists' shops, or otherwise.

Saccharine Ephidrosis.—M. MARIANO SEMMOLA, a distinguished young physician of Naples, has communicated to the Academy of Sciences (Sept. 10th), an extremely interesting case of saccharine sweat, or cutaneous diabetes, and what is very curious, the lungs of this patient, instead of giving off less carbonic acid than in the normal condition, exhaled more, the

respiration thus contributing, as far as it was able, to neutralize the injurious effects of the hyperglucosis.—*Moniteur des Hopitaux*, Oct. 3, and Nov. 9, 1855.

Chloroform in Pneumonia.—A Hungarian physician, Dr. STOHANDL, reports three cases of pneumonia in which much benefit was derived from the inhalation of small quantities of chloroform (30 to 40 drops), repeated several times a day. After each inhalation the symptoms were relieved; after four or six hours they again became aggravated, but were again relieved by a repetition of the inhalation. In from five to eight days a cure was effected.—*Revue de Therap. Med. Chirurg.*, Oct. 1, 1855, from *Ungar. Zeitschrift*.

Luxation of the Knee.—M. ROYER communicated to the Imperial Academy of Medicine, 18th Sept., 1855, a case of complete luxation of the knee forward, the tibia mounting many centimetres before and above the articulating surface of the femur, without tearing of the external parts. This luxation was easily reduced by forced flexion of the leg on the thigh, and a prompt cure was effected. In a month the patient could walk, and in six weeks the cure was completed.—*Revue de Therap. Med. Chirurg.*, Oct. 15, 1855.

Anæsthetics in the Austrian Army.—A circular has just been issued, ordering that in future the army medical officers shall always employ, for the purpose of inducing anæsthesia, a mixture consisting of one part chloroform and nine parts ether, this being the proportion long employed by Dr. Weiger, a Vienna dentist.—*Med. Times and Gaz.*, Nov. 17, 1855.

The Cholera in Germany and Italy.—The *Wiener Wochenschrift* reports that the cholera is almost everywhere on the decline. It furnishes some figures, also, which show that it has prevailed in some places with very great severity. To the end of September there had occurred in Trieste and its vicinity 4,000 cases, more than 1,600 of which were fatal. During the 130 days that the disease prevailed in that port, 968 cases (540 male and 428 female) were received into the Bürgerspital. Of this number 510 (268 males and 242 females) died. To the 27th, there had occurred in 290 localities of the

circle of Görz (in Illyria), 13,354 cases, of which 8,483 recovered, and 4,697 died. In 297 places in Istria 17,994 cases occurred with 6,192 deaths. Thirty places in Carinthia, having a population of above 8,000 souls, furnished 611 cases, with 377 recoveries. In the circle of Trent, to the 4th of October, 14,284 cases with 5,128 deaths had occurred. In Silesia, from 1 July to 22 September, amidst a population of 158,522 souls, 3,915 cases, with 1,591 deaths, occurred. In Oldenburgh, in 667 places, with a population of 732,323, there occurred 43,020 cases, giving rise to 17,291 deaths. In the government districts of Cracow the disease is still raging, the number of cases in 795 localities, with a population of 765,951, amounting to 33,741, with 13,487 deaths. In Cracow itself the cases were 3,376 in number, 1,185 of these fatal. In Berlin 1,761 cases, with 1,077 deaths, have taken place. In the Duchy of Parma 11,943 cases had occurred to the 5th of October, with 6,157 deaths.—*Med. Times and Gaz.*, Nov. 17, 1855.

Statistics of Cholera in Italy in 1854.—Dr. CASTIGLIONI has recently published the following figures respecting the cholera in Italy. He states that, with very few exceptions, the Italian practitioners are strong contagionists, and believe in the power of quarantine and isolation in preventing the invasion and spread of the disease. He instances Milan as a notorious instance, in which the prompt adoption of measures of this kind has checked three invasions of cholera in the bud.—(See *Annali Omodei*, vol. 153.) :—

Locality.	Cases.	Recovered.	Died.	Per Cent. of Mortality.	Proportion of Cases to Population.
Entire Lombardy,	3116	969	2127	68.26	1 to 908
Genoa,	5318	2382	2936	55.20	1 to 23
Turin,	2477	1076	1401	56.56	1 to 58
Entire Piedmont,	45000	21000	24000	53.33	1 to 204
Tuscany,	6512	2946	3566	54.76	1 to 276
City of Rome,	1668	563	1085	65.04	1 to 107
City of Naples,	12942	5206	7436	58.81	1 to 33
City of Catania.	3921	2218	1703	43.45	1 to 15

Sickness and Mortality in France.—From a table constructed from observations made in the hospitals of Paris for the year 1850, and republished in the *Assurance Magazine* for April, 1855, it appears that

masons, amongst males, present by far the highest figure as sufferers; next come the tailors, then house-painters, then bakers, then turners, then smelters; amongst these the *days of sickness* are longest in the masons, next in the tailors, then in the painters, next in the bakers, next in the turners, and lastly in the tanners. Of all these, the *mortality* is highest in the tailors; the masons follow, and the other occupations in the order we have already given. Out of 6,715 women attacked with sickness during the above period, not fewer than 4,268, or nearly two-thirds, were confectioners. In an admirable work on the benevolent institutions of France, M. de Watteville, in 1851, stated the ratio of deaths in the hospitals of Paris to be 1 in 11, both for males and females. This was for the year 1847, which, from the dearth of provisions and the consequent misery of the poorer classes, must be considered exceptional. He estimates also the average duration of sick cases in the hospital as twenty-four days for males and twenty-five for females. The average mortality amongst female cases seems to be greater than amongst males, the former being 1 death for 11.94 patients, and the latter 1 in 13.92; but this may arise from females not having recourse to the aid of the hospital until the last extremity.

British Association for the Advancement of Medical Science.—This association has had several very interesting meetings at Glasgow during the week, attended by Baron Liebig, Dr. Daubeny, Dr. Playfair, Sir David Brewster, Dr. Carpenter, Dr. Stenhouse, Professor Owen, &c. &c. Amongst the few subjects in relation to medicine, we may mention that Dr. Daubeny, of Oxford, exhibited a set of small grain weights, for weighing medicines, made of the new metal "aluminium," for which it seems peculiarly adapted, by its very superior brilliancy as a metal, and its great lightness: so that $\frac{1}{16}$ of a grain of strychnine, for instance, may be weighed with a weight as large as the present $\frac{1}{16}$ grain weight of the surgery drawer. The aluminium weight also does not contract rust or verdigris. A new compound of chlorine, analogous to the allotropic condition of oxygen in ozone, was exhibited by Dr. Andrews, of Belfast, and may hereafter be found to play an important part in the theory of disinfection and deodorization by

chlorine. Baron Liebig read a paper on a new compound of fulminic acid, the salts of which are of adamantine brilliancy. Chevalier Clausen exhibited artificial gutta-serena, likely to be very useful in forming splints and other appliances, for surgeons. Various interesting papers were also communicated, on the physiological changes in marine vivaria, &c.—*Lancet*, Sept. 22, 1855.

The Late Mr. Newport.—A plain but handsome monument, of Aberdeen granite, has recently been placed in the Cemetery of Kensal-green, to the memory of the late GEORGE NEWPORT, the eminent naturalist and physiologist. The following simple inscription on the stone implies strongly, if it does not formally express, the merits of the deceased. The fact of having a public monument raised to him by those who knew him best, his friends and fellow-workers, is a eulogy of a kind which can never be questioned, while his own scientific writings constitute his best and most enduring epitaph: "Sacred to the memory of George Newport, F. R. S., F. L. S., F. R. C. S., etc. etc. etc. He was born in Canterbury on the fourth day of July, 1803, and died in London on the seventh day of April, 1854. This monument was erected by Fellows of the Royal and Linnean Societies to commemorate their regret for the loss of a much esteemed colleague, and to testify their sense of the great services rendered by him to science."—*Med. Times and Gaz.*, Dec. 1, 1855.

Scarlatina.—This disease has, for the past two months, been prevalent in London, and still continues unabated.

OBITUARY RECORD.—Died, at Brighton, November 19, 1855, aged seventy-four, THOMAS COPELAND, Esq., author of the well-known work "On some of the Principal Diseases of the Rectum."

— at Brussels, M. BERGER, Dean of the Accoucheurs of that city, who is said to have delivered at least 20,000 women.

— at Paris, M. LOUIS GONDRET, aged 79, known by his advocacy of the use of ammoniacal preparations in amaurosis, &c.

— at Vienna, after a short illness, in the 64th year of his age, Dr. A. DE ROSAS, Professor of Ophthalmology and Director of the Ophthalmic Clinic of the University. He spent thirty-six years in teaching his speciality.